## Department of Planning and Budget 2025 General Assembly Session State Fiscal Impact Statement

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Bill Number: HB2307 ER Patron: Hodges

**Bill Title:** Prescription Monitoring Program; requirements of practitioners; pharmacy technicians;

training programs.

**Bill Summary:** Requires any prescriber of controlled substances approved for use in opioid addiction therapy to, prior to or as a part of execution of a treatment agreement with a patient, request information from the Director of the Department of Health Professions for the purpose of determining what, if any, other covered substances such patient is currently being prescribed. Under current law, only prescribers who hold a special identification number from the Drug Enforcement Administration (DEA) authorizing the prescribing of controlled substances are required to request such information prior to or as a part of execution of a treatment agreement with a patient. The bill also adds training programs recognized by the Pharmacy Technician Certification Board or the National Healthcareer Association to the list of approved pharmacy technician training programs.

**Budget Amendment Necessary:** No **Items Impacted:** n/a

**Explanation:** There is no fiscal impact resulting from this legislation. This bill does not require that

language updates be made to the proposed Appropriation Act.

**Fiscal Summary:** There is no impact to state resources resulting from this bill.

**Fiscal Analysis:** The Department of Health Professions (DHP) already fields requests for information regarding the prescription of covered substances to patients in opioid addiction therapy as part of the execution of a treatment plan with a patient. Expanding the number of providers who must request such information to execute a treatment plan beyond those individuals who hold a special identification number from the DEA does not change the responsibility on the part of DHP to make such information accessible upon request. While it is possible that DHP may now field new requests for information from providers without DEA identification numbers as a result of this legislation, it is expected that any such requests can be handled with existing resources.

Other: n/a